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(R	equestor's Name)				
(Address)					
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(C	ity/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
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SECRETARY OF STATE
TALLAHASSEE, FLORID,

## CORPORATE ACCESS, INC.

## AWhen you need ACCESS to the world $\cong$

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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1.	۲ .	Blufi Direct M CORPORATE NAME AND DO	lortgag DCUMENT#	je. Corporation	<u>,                                      </u>	
2.	-	(CORPORATE NAME AND DO	OCUMENT #)	)		
3.	_	(CORPORATE NAME AND DO	OCUMENT #)	)		
4.	_	(CORPORATE NAME AND DO	OCUMENT#)	)		
<i>5</i> .	_	(CORPORATE NAME AND DO	OCUMENT #)	)		
6.	_	(CORPORATE NAME AND DO	OCUMENT#)	)		
SPECIAL INSTRUCTIONS:						

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

BluFi Direct M	ortgage Corporation			
	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate na	ıme	adopted for the purpose of transacting busing	ness in Florida)
California		3.	32-0273125	
(State or country	under the law of which it is incorporated)		(FEI number, if applicable	)
01/20/2009		5.	Perpetual	
(Date	of incorporation)		(Duration: Year corp. will cease to exist of	or "perpetual")
Upon Qualifica	ition			
	(Date first transacted busine		n Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 60	7.1:	502, F.S., to determine penalty liability)	
1808 Aston Ave	., Suite 190, Carlsbad, CA 92008			
	(Principal office	add	ress)	
1808 Aston Ave	e., Suite 190, Carlsbad, CA 92008			
	(Current mailing	add	ress)	
Mortgage Lend				
(Purpose(s	s) of corporation authorized in home state of	)r cc	ountry to be carried out in state of Fiorida)	-4 -4
Name and stree	et address of Florida registered agent: (	(P.C	D. Box NOT acceptable)	SEG
Name:	Paracorp Incorporated			10 HAR -
ffice Address:	236 East 6th Avenue			ဟုံ့နှာ့ ထ
	Tallahassee		, Florida <u>32303</u>	PH 12: 3U
	(City)		(Zip code)	另一分
Demistered of	tant's accontance			DA C

### 10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:	for I have been by
A. DIRECTORS	
Chairman: John C. Lee	10 MAR -8 PM 12: 30
Address: 1808 Aston Ave., Suite 190, Carlsbad, CA 92008	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Vice Chairman: N/A	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS  President: John C. Lee	
1808 Aston Avo. Suito 190 Carlahad CA 92008	
Vice President: N/A	
Address:	
Secretary: John C. Lee	
Address: 1808 Aston Ave., Suite 190, Carlsbad, CA 92008	
Treasurer: John C. Lee	
Address: 1808 Aston Ave., Suite 190, Carlsbad, CA 92008	
NOTE: If necessary, you may attach an addendum to the application listing addit	tional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the	2/23/2010 application)
14 John C. Lee, President	

(Typed or printed name and capacity of person signing application)

## State of California Secretary of State

CERTIFICATE OF STATUS

10 MAR -8 PM 12: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ENTITY NAME:

BLUFI DIRECT MORTGAGE CORPORATION

FILE NUMBER:

C3178850

FORMATION DATE:

01/20/2009

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 04, 2010.

> DEBRA BOWEN Secretary of State